Iowa Academy of Family Physicians Testimony Presented by Rick Dobyns, M.D. to the Government Oversight Committee Subcommittee on House Study Bill 302 September 20, 2005

Dr. Dobyns is a Professor of Family Medicine at the University of Iowa and has specialty certification in Family Medicine, Geriatric Medicine, and Hospice and Palliative Medicine. He is the Director of the Palliative Care Service at the University of Iowa Hospitals and Clinics. He has taught the biomedical ethics course since its inception into the medical school curriculum.

If House Study Bill 302 is passed into law in its current language I believe the vast majority of Iowa physicians will, in most end-of-life cases, choose to be civilly disobedient and will break the law. I believe this because as a medical educator at the University of Iowa I have trained or lectured to hundreds of Iowa physicians that the withholding or cessation of hydration and nutrition is often morally justified.

It may be arguable whether hydration and nutrition is futile. It is not arguable from a medical point of view that their provision can cause physical harm. We know that a post-operative patient is in a physical state where the premature introduction of fluids or nutrition into the stomach or colon would lead to pain and suffering. People who are malnourished for other reasons would suffer the same consequences. Most end-of-life situations, because of the physiologic realities of most terminal illnesses, would be similar. A physician is morally justified in allowing some element of potential harm if the benefit is great. A young person in a temporary illness who cannot eat or drink for an extended period but is expected to improve is such a case.

This study bill allows exceptions when artificial hydration is medically impossible or could accelerate dying. I would add the exception of when the provision of artificial hydration and nutrition could, in the opinion of the attending physician, cause harm. Without the addition the current bill if passed unchanged would terrorize Iowans into attempting to write legally compelling documents that would meet the laws rigid requirements. I agree with the other presenters who state such legislation will diminish the private determination of a patient by forcing them to use documents that they don't understand and will diminish the role of proxy decision makes which, in my opinion, is the single most effective advance directive in use today.